GlobalResearch
Center for Research on Globalization

What They Don’t Tell You About Autoimmune Disorders and Arthritis

By A Midwestern Doctor
Global Research, May 30, 2025
Mercola

Theme: Science and Medicine

Treating illnesses by suppressing symptoms frequently precipitates far more severe diseases which have rippled out throughout our society

The primary management for most autoimmune conditions is through symptom-suppressing drugs, which frequently have significant toxicity

In most cases, autoimmune disorders and inflammatory joint conditions have an underlying cause, such as a chronic undiagnosed stealth infection or food allergy, which when addressed significantly improve the condition

Many factors in life that we can control and do not require prescriptions to address (e.g., diet, stress or sleep) directly contribute to autoimmunity and, when addressed, improve it

This article will review some of the key steps which can be taken to improve autoimmune disorders and reduce one’s reliance upon toxic medications

*

Autoimmune conditions have become one of the most common and stubborn health challenges of our time. While conventional medicine often treats them as mysterious immune system malfunctions — managed primarily with harmful steroids and other immunosuppressants[1] — there’s increasing evidence that many of these diseases are not random.

Rather, they’re signals of deeper dysfunctions in the body — many of which are tied to the modern lifestyle we’ve come to accept as normal.

Lifestyle Contributions to Autoimmunity

Many things in our lives that we have control over significantly affect our predisposition to autoimmunity:

• **Sleep —** I have previously written about the profound importance of sleep and how many different illnesses are linked to poor sleep. In practice, we frequently find that patients with autoimmune conditions also have disrupted sleep cycles, and these improve once that is addressed (e.g., by improving sleep hygiene and avoiding blue light).

Note: *The treatments for sleeping issues like insomnia are discussed further here.*

• **Sunlight —** Since the sun has no commercial lobby to advocate for it, the medical field demonizes sunlight as a cause of cancer despite a deficiency of the sun and sunlight being tied to a wide range of medical conditions (including cancers) and making individuals 60% more likely to die.[2]

A loss of sunlight exposure is also tied to many autoimmune conditions (e.g., multiple sclerosis). As such, we frequently find autoimmune patients improve from resuming healthy sunlight exposures (likewise, I suspect this partly explains why ultraviolet blood irradiation benefits so many different autoimmune conditions).

Note: *Appropriate sunlight exposure (e.g., going outside early in the morning and having the sunlight touch your face without being obstructed by glass) is also very helpful for reestablishing the circadian rhythm and restoring healthy sleep.*

• **Exercise —** Many of the benefits of exercise arise from the fluid circulation it creates in the body (as fluid stagnation underlies many illnesses) — many of which we suffer from due to our sedentary lifestyle.

This perspective, in turn, is corroborated by the Chinese Medical viewpoint that blood stasis causes autoimmunity and that either treating blood stasis or zeta potential (which underlies both microclotting and lymphatic stagnation) frequently improves autoimmune conditions.[3]

Note: *Exercise and eliminating fluid stagnation frequently improve insomnia. Likewise, sunlight exposure is a critical driver of fluid circulation throughout the body,[4] all of which illustrates how intertwined many of the key lifestyle factors we routinely ignore are to our health.*

• **Diet —** Food allergens such as wheat, dairy, and nightshades frequently contribute to autoimmune conditions (particularly arthritis), and many have found food elimination diets that identify the reactive allergen to improve their condition significantly.

Additionally, in many cases, allergies arise from deficient stomach acid, as without sufficient stomach acid, proteins are often not fully broken down (allowing intact allergens to enter circulation) and triggers acid reflux (due to top of the stomach only closing when sufficient stomach acid is present), which then irritates the lungs.

Note: *Many of the issues with gluten (e.g., autoimmunity or weight gain) are not experienced in countries like Italy that use more natural forms of wheat.*

• **Stress —** Is well known to predispose one to autoimmune disorders and flares (e.g., 80% of autoimmune patients report an unusually stressful situation prior to their disease onset,[5] while stress disorders increased the risk of autoimmune disorders by 46% to 129%).[6]

Note: *Some patients will not respond to a rheumatologic drug, until they eliminate the stress in their lives.*

The Global Loss of Vitality

If you review the early history of medicine, it is striking:

• How profoundly damaging many of the early Allopathic remedies were (e.g., the smallpox vaccine or mercury).

• How much healthier people were and how much more effective many natural therapies were in the past than they are now.

This second point prompted me to ask older doctors (from various medical schools) if they had observed a general decline in human vitality in the patients they saw at the start of their careers compared to the end, and all of them shared that they had. Additionally:

• They noted that beyond patients becoming much sicker and having conditions they'd never seen before, it was also much harder to treat them as each therapy they used had shifted from making a dramatic improvement to a more minuscule one, which required numerous successive treatments to bring about an improvement.

• They typically attributed this shift to a loss in human vitality. They cited a variety of correlates (e.g., the average human body temperature dropping,[7] people becoming less able to mount fevers, infants being less able to produce a brisk cry,[8] or increasing degrees of fluid stagnation in their patients).

Note: *Typically this decline in vitality proceeds in a linear fashion and then spikes at certain times (e.g., after the introduction of the smallpox vaccine, the 1986 law which granted immunity to vaccine manufacturers[9] and led to a rapid proliferation in the vaccine schedule, and after the COVID vaccines).*

In each case, this increase in disease gets normalized and forgotten by the next generation of doctors (who entered practice after the last wave of sickness had become the "new normal").

Likewise, many datasets corroborate this steady decreasing vitality in humanity over the decades (e.g., we've witnessed a continual increase in autoimmune disorders).

Having extensively explored this topic, we believe much of it is due to modern technology (e.g., vaccines, chronic chemical exposures or heavy metal toxicity, dentistry and surgical scars, EMFs, and widespread circadian rhythm disruption). Many of these, in turn, share a common thread — creating fluid stagnation throughout the body.

Note: *After thousands of years, around 1830, blood stasis suddenly came to be viewed as a primary cause of disease in Chinese Medicine,[10] which occurred shortly after the smallpox vaccine (which caused many severe injuries resembling blood stasis), which was introduced in China in 1805.[11]*

Systemic Suppression

One of the central criticisms of Allopathic medicine by natural schools of medicine has been that anytime an external agent is used to forcefully change a process which is unfolding within the body (rather than aiding the body's ability to resolve it) you run the risk of a minor temporary issue being exchanged for a severe chronic one — especially when this is repeatedly done throughout the course of someone's life.

In some cases, this risk is very justified (e.g., in a life-threatening emergency or with a relatively safe drug that has limited long-term complications). At the same time, however, a general unwillingness to acknowledge this issue pervades Allopathic medicine.

I've thus never forgotten a conference in the 1970s at which one of the world's leading homeopaths convened a panel to discuss the likely consequences of modern medicine routinely suppressing symptoms (e.g., aggressively using fever suppressing medications or preventing childhood febrile illnesses with vaccination).

Note: *Studies have repeatedly linked preventing measles, mumps, and chickenpox to severe cancers later in life.*[12]

At that conference, building upon the recent mass introduction of suppressive steroids, they correctly predicted that if this suppression continued to increase, in the decades to follow:

• We would see a global shift from less severe illnesses to more severe ones.

• That this suppression would cause physical illnesses to be pushed deeper into the body and be replaced with psychiatric illnesses, and in time spiritual ones (particularly when the psychiatric illnesses were also suppressed with medications) — all of which would dovetail with people being willing to do crazier and crazier things.

Now, everyone has gradually become habituated to patients "just being" sicker and sicker, and that not much can be done about it.

Suppressive Antibiotics

While steroids are one of the medications most associated with "suppressing" illness, many others are too.[13] For example, for years, many natural medicine practitioners (e.g., homeopaths) also told me they'd frequently seen antibiotics "treat" an acute infection but turn it into a chronic one. I wasn't sure what to make of this (as microbiome disruption could partially but not fully explain it), then I discovered something similar existed in Chinese Medicine:[14]

> "The concept of Latent Heat is very old in Chinese medicine, having been mentioned for the first time in the 'Yellow Emperor's Classic of Internal Medicine'.
>
> Latent Heat occurs when an external pathogenic factor penetrates the body without causing apparent symptoms at the time; the pathogenic factor penetrates into the Interior, and 'incubates' there, turning into interior Heat. This Heat later emerges with

acute symptoms of Heat: when it emerges, it is called Latent Heat."

Note: *In modern Chinese Medicine, antibiotics[15] and vaccines[16] are now proposed as sources of Latent Heat.*

Much later, when I read "Cell Wall Deficient Forms: Stealth Pathogens" all of this finally made sense.[17] This book argued that when bacteria are exposed to lethal stressors, particularly cell wall destroying antibiotics, while most will die, some will instead enter a primitive survival mode and transform into misshapen cell wall deficient (CWD) "mycoplasma like" bacteria which can radically change their size or morphology (and hence look very different).

While these bacteria are hard to detect (and when seen, due to no one knowing they "exist," are often mistaken for cellular debris and ignored), with the correct techniques they can be detected. In turn, the book provides a wealth of evidence that CWD bacteria:[18]

• Are found within many "aseptic" tissues undergoing an autoimmune attack, with specific CWD bacteria associated with many different autoimmune disorders which have no known cause.

• Once the environment is "safe" can transform back into their normal form and cause a sudden recurrence of an infection — suggesting chronic infections are due to antibiotics creating a dormant CWD population rather than continual reinfection.

Note: *Many popular alternative schools of medicine (e.g., those of Rife,[19] Naessens,[20] and Enderlein)[21] came from microscopes which could directly observe these pleomorphic bacteria continually shifting into new morphologies, and that diseases states (e.g., cancer) correlated to specific morphologies, while other morphologies resulted in a symbiotic state of health.*

Since the morphologies adopted correlated with the internal state of the body, this gave rise to the belief that treatments should aim to create "healthy terrains" within the body, which would give rise to non-pathogenic forms of the bacteria rather than antibiotics that provoked pathogen transformation.

Addressing Autoimmune Diseases

When autoimmune disorders are treated in conventional practice, we feel five errors repeatedly occur:

1. Frequently, autoimmune disorders have a cause (e.g., a chronic infection) that goes unrecognized, resulting in powerful immune-suppressing drugs being used instead, while the underlying issue progresses.

2. In many cases, lifestyle factors significantly exacerbate autoimmune conditions. If these factors were focused on, the symptoms of the autoimmune condition would significantly reduce, and the amount of medication required to manage the condition in tandem would as

well.

3. Those lifestyle factors (e.g., diet) can also prevent conventional treatments from working. Because of that, in many cases where a medication that "should work" but does not, focusing on the unaddressed lifestyle factors for a patient is often what's needed for a remission.

Unfortunately, in those instances, rather than the doctor taking a step back and asking, "What am I missing here," the reflex often is to simply give more immune-suppressing medications. In short, if a patient has been on multiple potent rheumatologic drugs, something important was most likely missed.

4. As many of the safer autoimmune drugs with the best risk to benefit ratio are relatively new, most doctors in practice are not aware they exist (e.g., that side-effect free alternatives to methotrexate exist) or that they can be used to treat many challenging issues in rheumatology (e.g., corticosteroid pills suppressing endogenous steroid production or large rheumatoid nodules).

As such, drugs that should not be used for extended periods (e.g., steroids and NSAIDs) are instead frequently the mainstay of treatment.

Note: *In some cases (e.g., for a dangerous and rapidly progressing autoimmune disease or in instances where it is not feasible for a patient to implement a natural treatment plan), immune-suppressing medications, even with their side effects, are necessary.*

5. Many highly effective non-standard treatments for autoimmune conditions remain fairly unknown despite extensive scientific evidence demonstrating their efficacy (e.g., ultraviolet blood irradiation or DMSO). Likewise, since there are so many natural therapies for autoimmune conditions, it's often so difficult to sort out which work that they all get cast under the same umbrella and ignored.

Note: *Many of those therapies are both anti-inflammatory and highly effective at treating mycoplasma bacteria.*

Because of these issues, the management of autoimmune conditions remains less than satisfactory for many patients — which is particularly unfortunate given that these conditions are becoming increasingly common (e.g., extensive evidence ties increasing vaccination to autoimmunity).

Conclusion

Since our medical system focuses on treating isolated symptoms with patentable pharmaceuticals rather than attempting to identify the root cause of a permanent illness, patients suffer, particularly those with chronic disorders.

In this regard, autoimmune diseases are particularly unfortunate as they force patients to choose between having a debilitating and sometimes fatal illness or a lifetime of fairly toxic immune-suppressing drugs (e.g., steroids have a wide range of severe side effects, particularly when used systemically for a prolonged period).

But here's the hopeful part: when we start looking at the body as a whole system and work to restore its natural balance — whether through better sleep, movement, diet, or managing stress — people often feel dramatically better.

Healing isn't always fast or easy, but it's absolutely possible when we stop chasing symptoms and start supporting the body's own wisdom. Likewise, while very little focus is given in mainstream medicine for producing safe treatments for autoimmunity or arthritis, many natural treatments have been developed(such as DMSO) which no longer force patients to accept a lifetime of toxic therapies to survive and be free of pain.

Author's Note: *This is an abridged version of a longer article which goes into more detail on the safest natural and conventional treatments for autoimmune disorders and musculoskeletal disorders like arthritis, the dangers of steroids and the ways to safely utilize or withdraw from steroids. That article can be read here.*

*

Click the share button below to email/forward this article. Follow us on Instagram and X and subscribe to our Telegram Channel. Feel free to repost Global Research articles with proper attribution.

Notes

[1, 13] The Forgotten Side of Medicine, April 26, 2025

[2] The Forgotten Side of Medicine, April 21, 2024

[3] The Forgotten Side of Medicine, March 31, 2024

[4] The Forgotten Side of Medicine, December 8, 2024

[5] El Rosario University Press; 2013 Jul 18

[6] JAMA. 2018;319(23):2388-2400

[7] Stanford University, School of Medicine, January 7, 2020

[8] The Forgotten Side of Medicine, February 16, 2025

[9] The Forgotten Side of Medicine, November 24, 2023

[10, 11] The Forgotten Side of Medicine, July 23, 2023

[12] The Forgotten Side of Medicine, May 26, 2024

[14, 16] Amazon, The Foundations of Chinese Medicine: A Comprehensive Text

[15] Nicholas Sieben, MS, L.AC. April 7, 2011

[17, 18] Amazon, Cell Wall Deficient Forms: Stealth Pathogens

[19] Rife.org

[20] H.J. Kramer, 1991 (Archived)

[21] BRMI, Gunther Enderlein

Featured image source

Global Research is a reader-funded media. We do not accept any funding from corporations or governments. Help us stay afloat. Click the image below to make a one-time or recurring donation.

The original source of this article is Mercola
Copyright © A Midwestern Doctor, Mercola, 2025

Comment on Global Research Articles on our Facebook page

Become a Member of Global Research

Articles by: **A Midwestern Doctor**

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca

www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca